| Fill | in this information to identify your case: | | | | | | |
|--|---|---|-------------------|--|---|--|--|
| Deb | otor 1 John R. Hall, Jr. | | Check if this is: | | | | |
| | | | | An amended filing | | | |
| | ouse, if filing) | | | A supplement show 13 expenses as of | ving postpetition chapter the following date: | | |
| United States Bankruptcy Court for the: EASTERN DISTRICT OF PENNSYLVANIA | | | | MM / DD / YYYY | | | |
| | e number 20-11144 | | | | | | |
| (lf kı | nown) | | | | | | |
| Of | fficial Form 106J | | | | | | |
| | chedule J: Your Expenses | | | | 12/1 | | |
| info | as complete and accurate as possible. If two married people a ormation. If more space is needed, attach another sheet to this mber (if known). Answer every question. | | | | | | |
| Pari | t 1: Describe Your Household Is this a joint case? | | | | | | |
| | ■ No. Go to line 2. □ Yes. Does Debtor 2 live in a separate household? | | | | | | |
| | ☐ No☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expense</i> | es for Separate Househ | old of Deb | otor 2. | | | |
| 2. | Do you have dependents? ☐ No | | | | | | |
| | Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent | Dependent's relation Debtor 1 or Debtor 2 | | Dependent's age | Does dependent live with you? | | |
| | Do not state the dependents names. | Daughter | | 3 | □ No ■ Yes | | |
| | | Son | | 10 | □ No ■ Yes | | |
| | | Daughter | | 15 | □ No ■ Yes | | |
| | | | | | □ No □ Yes | | |
| 3. | Do your expenses include expenses of people other than yourself and your dependents? | | | | Li Tes | | |
| exp | Estimate Your Ongoing Monthly Expenses imate your expenses as of your bankruptcy filing date unless benses as of a date after the bankruptcy is filed. If this is a supplicable date. | | | | | | |
| the | lude expenses paid for with non-cash government assistance value of such assistance and have included it on <i>Schedule I:</i> ficial Form 106I.) | | | Your expe | enses | | |
| 4. | The rental or home ownership expenses for your residence. payments and any rent for the ground or lot. | Include first mortgage | 4. \$ | ß | 528.00 | | |
| | If not included in line 4: | | | | | | |
| | 4a. Real estate taxes | | 4a. S | \$ | 0.00 | | |
| | 4b. Property, homeowner's, or renter's insurance | | 4b. \$ | · | 0.00 | | |
| | 4c. Home maintenance, repair, and upkeep expenses | | 4c. \$ | · | 79.00 | | |
| 5. | Homeowner's association or condominium dues Additional mortgage payments for your residence, such as he | ome equity loans | 4d. \$ | <u> </u> | 0.00 0.00 | | |

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| John R. Hall, Jr. | | Case numb | er (if known) | 20-11144 |
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| | ural nas | Ба | \$ | 295.00 |
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| Other. Specify: | | 17d. | \$ | 0.00 |
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| icted from your pay | on line 5, Schedule I, Your Income (Officia | 11 1 Olilli 1001 <i>)</i> . | · | |
| | ce to support others who do not live with y | | \$ | 0.00 |
| · | | | | |
| | | | | |
| • • | property | | · | 0.00 |
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| | | 20c. | \$ | 0.00 |
| Maintenance, repair, | , and upkeep expenses | | · | 0.00 |
| Homeowner's assoc | ciation or condominium dues | 20e. | \$ | 0.00 |
| r: Specify: | | 21. | +\$ | 0.00 |
| · · · — | | | | |
| | • | | • | |
| • | | _ | | 2,326.00 |
| Copy line 22 (monthly | expenses for Debtor 2), if any, from Official | Form 106J-2 | \$ | |
| Add line 22a and 22b. | . The result is your monthly expenses. | | \$ | 2,326.00 |
| | | Į | | <u> </u> |
| | | 0.5 | • | |
| | | | | 3,080.67 |
| Copy your monthly e | expenses from line 22c above. | 23b. | -\$ | 2,326.00 |
| Outstands | h | [| | |
| | | 220 | \$ | 754.67 |
| ine result is your me | ontnly net income. | 230. | Ψ | 104101 |
| ou expect an incress | se or decrease in your expenses within th | a vear after you file this | form? | |
| | o finish paying for your car loan within the year or do | | | ease or decrease because of a |
| Xamble, uo vou expeci io | | , - = onpost , sai mongage p | , | 3. acc. cacc bookage of a |
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| | ur mortgage? | | | |
| | Electricity, heat, nate Water, sewer, garbate Telephone, cell photo Other. Specify: d and housekeeping dcare and children's hing, laundry, and dronal care products a ical and dental expension include car payment ratinment, clubs, recritable contributions rance. Tot include insurance of the insurance of the insurance of the insurance of the insurance. Specify: Car payments for Vecar payments of alimor ucted from your payer payments of alimor ucted from your payer payments of alimor ucted from your payer payments on other Real estate taxes Property, homeowner Maintenance, repair Homeowner's associer: Specify: Car payments of alimor ucted from your payer payments on other Real estate taxes Property, homeowner Maintenance, repair Homeowner's associer: Specify: Car payments of alimor ucted from your monthly expected from the payer payments on other Real estate taxes Property, homeowner Maintenance, repair Homeowner's associer: Specify: Car payments of alimor ucted from your monthly expected from your month | Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other, Specify: d and housekeeping supplies dcare and children's education costs hing, laundry, and dry cleaning ional care products and services ical and dental expenses isportation. Include gas, maintenance, bus or train fare. ot include car payments. ritainment, clubs, recreation, newspapers, magazines, and boo ritable contributions and religious donations rance. ot include insurance deducted from your pay or included in lines 4 Life insurance Health insurance Health insurance Other insurance. Specify: as. Do not include taxes deducted from your pay or included in lines cify: allment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: other. Specify: or payments of alimony, maintenance, and support that you did ucted from your pay on line 5, Schedule I, Your Income (Official are payments you make to support others who do not live with y cify: are real property expenses not included in lines 4 or 5 of this for Mortgages on other property Real estate taxes Property, homeowner's, or renter's insurance Maintenance, repair, and upkeep expenses Homeowner's association or condominium dues are Specify: ulate your monthly expenses Add lines 4 through 21. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Add line 22a and 22b. The result is your monthly expenses. ulate your monthly net income. Copy line 12 (your combined monthly income) from Schedule I. Copy our monthly expenses from line 22c above. Subtract your monthly expenses from your monthly income. The result is your monthly expenses from your monthly income. | Electricity, heat, natural gas Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services 6c. Other. Specify: d and housekeeping supplies 6d. dare and children's education costs hing, laundry, and dry cleaning 9. conal care products and services ical and dental expenses 110. ical and dental expenses sportation. Include gas, maintenance, bus or train fare. of include car payments. ritable contributions and religious donations ritable contributions ritable contributions and religious donations ritable contributions ritable contributions ritable contributions and religious donations ritable contributions ritable contribut | Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: d and housekeeping supplies dcare and children's education costs hing, laundry, and dry cleaning onal care products and services ical and dental expenses incal and dental expenses isportation. Include gas, maintenance, bus or train fare. of include car payments. retainment, clubs, recreation, newspapers, magazines, and books italiande contributions and religious donations rance. of include insurance deducted from your pay or included in lines 4 or 20. Life insurance Usife insurance Vehicle insurance Vehicle insurance Vehicle insurance Vehicle insurance Incar payments So. Do not include taxes deducted from your pay or included in lines 4 or 20. Sify: Incar payments for Vehicle 1 Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Dother. |